



**UNITED STATES MARINE CORPS**  
III MARINE EXPEDITIONARY FORCE, FMF  
UNIT 35601  
FPO AP 96606-5601

ForO 6220.2  
16

**07 MAY 2002**

FORCE ORDER 6220.2

From: Commanding General  
To: Distribution List

Subj: LEPTOSPIROSIS PROPHYLAXIS FOR TRAINING ON OKINAWA

1. Purpose. To provide guidance on leptospirosis chemoprophylaxis for personnel assigned to and conducting training on Okinawa, Japan.

2. Background. Leptospirosis is an infectious illness caused by a spirochete that infects both domestic and wild animals, especially rodents. Personnel can become infected when exposed to surface water contaminated by the urine and feces of various rodents and other animals. Sources of infection may include lakes, rivers, streams, ponds, drainage ditches, sugar cane fields, rice paddies, and recreational swimming areas. Contaminated mud and plants are also a source of infection. The infectious organism enters the body through direct contact with the skin or mucous membranes, or through the intestinal tract, if contaminated water is swallowed. The peak time for infection is usually in the summer months (May through September) but the risk of infection is present year round. Symptoms begin about ten days after one is infected and may be similar to the "flu." They include fever, chills, headache, conjunctival suffusion, and muscle pain. Leptospirosis may be difficult to distinguish from other diseases. Serious infections may cause severe bleeding, liver and kidney failure, meningitis, heart complications, and death. Areas of greatest risk on Okinawa include the Northern Training Area and recreational swimming areas such as Hiji and Aha Falls in the northern part of Okinawa.

3. Action. All units training in the above areas must adhere to the guidance below:

a. Avoid swimming, wading, and any other form of contact with water, mud, or plants around bodies of surface water (flowing or stagnant) where leptospirosis may be present, as much as possible.

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b. Chemoprophylaxis

(1) All personnel training on Okinawa who may be exposed to surface freshwater or those participating in recreational activities where exposure is likely, must take 200 mg of doxycycline when entering the risk area and every seven days while in the area of risk. A final dose of doxycycline 200 mg is required when leaving the risk area. Pregnant or lactating women and children should not take doxycycline.

(2) Personnel who cannot take doxycycline should be especially careful to avoid exposure. Any exposure must be documented in the health record. Members should seek medical attention immediately for illnesses with a fever following exposure.

  
D. C. O'BRIEN  
Chief of Staff

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